									Application or Docket Number			
	PATENT	APPLICATI Effé		10735761								
CLAIMS AS FILED - PART I								SMALL	ENTITY		OTHE	R THAN
(Column 1) (Column 2)								TYPE		OR	SMALL	ENTITY
T	OTAL CLAIM:	S	7					RATE	FEE		RATE	FEE
F	OR .	. •	NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	1 minus 20=		· 4			X\$ 9 ₌	=	OR	X\$18=	
INI	DEPENDENT C	CLAIMS	3.	ninus 3 =	* 1		X43=		OR	X86=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT	RESENT				+145=	:	OR		
* [1	the difference	e in column 1. is	less than zero, enter "0" in column 2					TOTAL	100	OR	L	
	CLAIMS AS AMENDED - PART II								707)	OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)		SMAL	L ENTITY	OR	SMALL	
ENTA		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	. ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=	
							L	TOTA	_1	OR	TOTAL	
							Α	ODIT. FE	E L	1011	ADDIT, FEE	
	(Column 1) (Column 2) (Column 3 CLAIMS HIGHEST						Г		LADDI	1		4001
5 F		REMAINING ÄFTER AMENDMENT		NUMB PREVIO PAID F	ŲSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .	· ·	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus' .	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	LTIPLE DEPENDENT CLAIM				+145=		OR	+290=	
•	•					•		TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
$\overline{\mathbf{J}}$	\ .	CLAIMS		HIGHE	ST		Г		ADDI-]. [<u></u>	ADDI-
		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	JSLY	PRESENT EXTRA		RAŢE	TIONAL	,	RATE	TIONAL FEE
	Fotal	region jume je jermes, manjur seme mi	Minus			·_······		X\$ 9=		OR	X\$18=	
	Independent . Minus .				=	-	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
+145=										OR	+290=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL ADDIT. FEE										OR A	TOTAL DOIT, FEE	
** [:	the Highest Num	nber Previously Paid							orooriala hov			1